

INSTRUCTIONS ON REVERSE SIDE

No. 38110	Idaho Corporation Annual Report Form		2. Registered Agent and Office		
Return To REINSTATEMENT Secretary of State Room 203, Statehouse Boise, ID 83720 FORFEITED 12/1/94 FEE DUE: \$20.00	Due No Later Than November 1,		RAYETTA REICH LON W. Loughby ROUTE 4 box 5570 HCR 60 Box 177 BONNERS FERRY ID 83805		
	Mailing Address — Please Correct				
	BOUNDARY VOLUNTEER AMBULANCE SERVICE, INCORPORATED PRESIDENT PO BOX 441 BONNERS FERRY ID 83805		3. Incorporated Under The Laws of Idaho #38110		
4. Names and Addresses of Officers and Directors					
	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
President:	BILL MUNSON	P.O. BOX 864	PORT HILL	ID	83853
Secretary:	PAT ALEXANDER	P.O. BOX 801	BONNERS FERRY	ID	83805
Directors:	PAT MURPHY	P.O. BOX 233	PORT HILL	ID	83853
	LON W. Loughby	HCR 60 BOX 177	BONNERS FERRY	ID	83805
	STEVE HOWLETT	P.O. BOX 1166	BONNERS FERRY	ID	83805
5. Nature of Business		6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete.			
VOL. AMBULANCE SERVICE		Signature <u>Bill Munson</u> Name (Typed or Printed) <u>BILL MUNSON</u>		Date <u>2-6-95</u> Title <u>PRESIDENT</u>	